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FILED

Jan 31 1997 8:00am
Secretary of StateNONPROFIT
CORPORATION
ANNUAL REPORT
1997FLORIDA DEPARTMENT OF STATE
Sandra B. McRham
Secretary of State
DIVISION OF CORPORATIONS

DOCUMENT # 739104 (8)

1. Corporation Name

THE DAYTONA BEACH BOAT CLUB, INC.

Principal Place of Business

Mailing Address

150 S.PALMETTO AVE
DAYTONA BEACH FL 32114-4320P. O. BOX 1021
DAYTONA BEACH FL 32115-1021
US3. Date Incorporated or Qualified
05/19/19773a. Date of Last Report
04/18/19964. FEI Number
59-2835499Applied For
Not Applicable5. Certificate of Status Desired ☐\$8.75 Additional
Fee Required6. Election Campaign Financing
Trust Fund Contribution ☐\$5.00 May Be
Added to Fees8. This corporation has liability for intangible tax under s. 199.032,
Florida Statutes ☐ Yes ☐ No

2. Principal Place of Business

2a. Mailing Address

21 Suite, Apt. #, etc.

26 Suite, Apt. #, etc.

22 City & State

27 City & State

23 Zip Country

28 Zip Country

24 25

29 30

9. Name and Address of Current Registered Agent

10. Name and Address of New Registered Agent

TUMBLESON, J. DOYLE
150 S.PALMETTO AVE
DAYTONA BEACH FL 32118

81 Name

82 Street Address (P.O. Box Number is Not Acceptable)

83

84 City

FL

85 Zip Code

11. Pursuant to the provisions of Sections 617.0502 and 617.1508, Florida Statutes, the above-named corporation submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida. Such change was authorized by the corporation's board of directors. I hereby accept the appointment as registered agent. I am familiar with, and accept the obligations of, Section 617.0503, Florida Statutes.

SIGNATURE

Signature, typed or printed name of registered agent and title if applicable.

(NOTE: Registered Agent signature required when reinstating)

DATE

12. OFFICERS AND DIRECTORS

TITLE	V	☒ DELETE
NAME	THALHEIMER, JAMES	
STREET ADDRESS	203 COUNTRY CLUB DR	
CITY - ST - ZIP	ORMOND BCH FL	
TITLE	S	☒ DELETE
NAME	DUNSWORTH, ANN	
STREET ADDRESS	79 JAMESTOWN DR	
CITY - ST - ZIP	ORMOND BEACH FL	
TITLE	TD	☒ DELETE
NAME	MCKAY, DAVID C.	
STREET ADDRESS	840 CHICKADEE DRIVE	
CITY - ST - ZIP	PT ORANGE FL	
TITLE	P	☐ DELETE
NAME	WILLIAMSON, TRUDY	
STREET ADDRESS	128 CYPRESS POND RD.	
CITY - ST - ZIP	DAYTONA BEACH FL	
TITLE	D	☐ DELETE
NAME	FRICKE, WILLIAM	
STREET ADDRESS	116 WILLOW BEND LANE	
CITY - ST - ZIP	ORMOND BCH FL	
TITLE	D	☒ DELETE
NAME	KLINDT, DORIS	
STREET ADDRESS	121 JAMESTOWN DR	
CITY - ST - ZIP	ORMOND BCH FL	

13 (AS OF 1-9-97) ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS IN 12

1.1 TITLE	REAR COMMODORE (D)	☐ Change ☒ Addition
1.2 NAME	BILL DUNSWORTH	
1.3 STREET ADDRESS	79 JAMESTOWN DR	
1.4 CITY - ST - ZIP	ORMOND BCH, FL 32176	
2.1 TITLE	SECRETARY	☐ Change ☒ Addition
2.2 NAME	LOLLY FRICKE (D)	
2.3 STREET ADDRESS	116 WILLOW BEND LANE	
2.4 CITY - ST - ZIP	ORMOND BCH, FL 32174	
3.1 TITLE	TREASURER	☐ Change ☒ Addition
3.2 NAME	RON COLUMBIALE (D)	
3.3 STREET ADDRESS	30 CHOCTAW TRAIL	
3.4 CITY - ST - ZIP	ORMOND BCH, FL 32174	
4.1 TITLE		☐ Change ☐ Addition
4.2 NAME		
4.3 STREET ADDRESS		
4.4 CITY - ST - ZIP		
5.1 TITLE		☐ Change ☐ Addition
5.2 NAME		
5.3 STREET ADDRESS		
5.4 CITY - ST - ZIP		
6.1 TITLE	CRUISEMASTER (D)	☐ Change ☐ Addition
6.2 NAME	FRAN KLINDT	
6.3 STREET ADDRESS	121 JAMESTOWN DR	
6.4 CITY - ST - ZIP	ORMOND BCH, FL 32176	

14. I do hereby certify that the information supplied with this filing does not qualify for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this annual report or supplemental annual report is true and accurate and that my signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears in Block 12 or Block 13 if changed, or on an attachment with an address.

SIGNATURE:

SIGNATURE REQUIRED

DC MCKAY 1-8-97 TREASURER

SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR

Date

Daytime Phone 40002084

CR2E037 (9/96)